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TELECOPIER COVER SHEET

Client/Matter Nos: 77060

Date: November 29, 2005

The transmission that follows totals 15 pages, including this cover sheet. Please deliver immediately to the following:

> Mail Stop AF Art Unit: 1761

Confirmation No.: 5534

Fax: (571) 273-8300

Re:

U.S. Application No.: 10/696,636

AKASHE, et al.

This transmission is being sent by ramon r. hoch, please call (202-419-7000) if there is a problem with this transmission.

COMMENTS:

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on November 29, 2005.

-Ramon R 7-1 och

Ramon R. Hoch, Reg. No. 34,108

Attached Paper(s):

1) Transmittal

(2 pages);

2) Petition for Extension of Time (4 pages, in duplicate)

3) Amendment after Final

(8 pages).

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appin No.:	10/090,030	Confirmation No. 5534			
Filed:	October 29, 2003)			
Applicant(s):	AKASHE, et al.) <u>CERTIFICATE OF MAILING</u>) I hereby certify that this paper is being deposited			
Title:	METHOD OF PREPARATION OF HIGH QUALITY SOY-CONTAINING CHEESE PRODUCTS	with the United States Postal Service with suffice postage as first class mail in an envelope address to the Commissioner for Patents, P.O Box 16 Alexandria, VA 22313-1450, on this date.			
Art Unit:	1761) ————————————————————————————————————			
Examiner:	Weier, Anthony J.	Registration No			
Attorney Doc	ket: 77060				
Customer No	.: 48940	,)			

TRANSMITTAL

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment after final/reply in the above-identified application.

- An Appendix including amended drawing figures labeled as "Annotated Marked-up Drawings" is enclosed.
- A Petition for Extension of Time for reply is attached.
- □ A Terminal Disclaimer(s) is enclosed together with a fee payment sheet.
- No additional claim fee is required.

Fee Calculation For Claims As Amended

	As Amended		Previously Paid For		Present Extra		Rate	A	dditional Fee
Independent Claims	1	_ •	3	**=	0	x\$	200.00 =	\$	0.00
Total Claims	6		20	* =	0	- ×\$	50.00 =	\$	0.00
Fee for Multiple Dependent Claims					- \$	360.00	\$	0.00	
** At least 3					Total A	dditid	onal Fee	\$	0.00

* At least 20

Application No. 10/696,636 Amendment After Final dated November 29, 2005 Reply to Final Office Action of July 27, 2005

	(37 C.F.R. § 1.27), thus reducing the fee by half to:
므	A check in the amount of \$ is enclosed.
ㅁ	Charge \$ to Deposit Account No. 06-1135.
	The Commissioner is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 06-1135. Should no proper payment be enclosed herewith, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1135. A duplicate copy of this sheet is enclosed.
	November 29, 2005 Ramon Ra Hoch
	Date Ramon R. Hoch Registration No. 34,108

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